

Department of Labor & Industries
Apprenticeship Section
PO Box 44530
Olympia WA 98504-4530



APPRENTICE TRANSFER AGREEMENT

Washington State Apprenticeship and
Training Council

L&I Apprenticeship
Coordinator

Date of Transfer Agreement:

/ /

This Transfer Agreement entered into on the above date is hereby entered into between the two participating Washington State registered apprenticeship programs and the apprentice (parent or guardian, if a minor). The Apprenticeship Committee to which the apprentice is being transferred agrees to train the apprentice, and the apprentice agrees to perform the work of the trade diligently and faithfully during the term of apprenticeship, in accordance with the terms and conditions of the apprenticeship standards for the apprenticeship program to which the apprentice is transferring.

Transfer effective date:

/ /

Apprentice full name:

Apprentice registration number:

Address:

City:

State:

Zip:

FROM:

Official name of registered apprenticeship program transferring apprentice:

Occupation:

Date signed:

/ /

Name of individual authorized to sign:

Signature of authorized individual:

TO:

Official name of registered apprenticeship program assuming responsibility of apprentice:

Occupation:

Term of apprenticeship (hours or months):

Credit for previous experience (hours or months):

Registered at wage progression step:

Hours/Months to complete Probation (if applicable):

Date signed:

/ /

Name of individual authorized to sign:

Signature of authorized individual:

Name of Employer (Authorized Training Agent) providing training (if applicable):

Signature of Employer (Authorized Training Agent) (if applicable):

Date signed by employer (Authorized Training Agent):

Copy of new apprenticeship standards received: yes ☐ no ☐ _____ (initials)

(Apprentice - legal signature)

(Date signed)

(If a minor, parent or guardian signature)